FEC FORM 2 STATEMENT OF CANDIDACY

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(a) Name of Candidate (in full)		,2023 FEB - 3 PF	12: 20		
CILANDOON OF EDUCATE	ika Ja Wa	prempo			
(b) Address (number and street) Check if addre	ss changed	2. FEC Candidate Identif	ication Number		
POB 753251 (302 7+hAve 1)	Mine)	3. Is This Ne	w Amended		
Fairbanks. AK 99775,32	5 1	Statement (N)	OR (A)		
4. Party Affiliation 5. Office Sought		istrict of Candidate			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
7. I hereby designate the following named political committee as r	ny Principal Campaign Co	mmittee for the 2024	election(s).		
NOTE: This designation should be filed with the appropriate off	ce listed in the instructions	(year of elect s.	ion)		
(a) Name of Committee (in full)					
M-Jo for US - Malionis (b) Address (number and street)	$\omega_{i,i}$				
POB 753251 (c) City, State, and ZIP Code					
Fairbanks, AK 99775.32	51		, 4 5 41		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES					
(including Joi	nt Fundraising Representa	nives)			
I hereby authorize the following named committee, which is NC candidacy. NOTE: This designation should be filed with the principal camp		committee, to receive and exp	end funds on behalf of my		
1	agn committee.				
ha at this time of tilin (a) Name of Committee (in full)	9				
(b) Address (number and street)					
(c) City, State, and ZIP Code					
I certify that I have examined this Statement and to	the best of my knowledge	e and belief it is true, correct	and complete.		
Signature of Candidate		Date			
		Mondavita	mary 30, 2023		
NOTE: Submission of false, erroneous, or incomplete information	may subject the person sig		<u> </u>		
9-00068	<u> </u>		FEC FORM 2 (REV. 02/2009)		

2023 - 02 - 05 - 05 - 00456467

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.				
	a) Name of Committee (in full)				
	h la this time of filing (b) Address (number and street)				
	(c) City, State, and ZIP Code				
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	n/2 12 11 11				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	Na"" "				
	(b) Address (number and street)				
	(c) City, State, and ZIP Code				
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full) (b) Address (number and street)				
	(c) City, State, and ZIP Code				
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